



**Franciscan Employee Assistance Program  
Formal EAP Referral**

Coworker Name	Coworker ID	Today's Date
Franciscan Alliance Facility Name	Department	Date of Employment
Referring Management		Telephone Number

Behavioral Reasons for Referral:

History of HR/Coworker Discussions/Correction Actions Taken (Attach Documentation)

Date	Reason	Result
Date	Reason	Result
Date	Reason	Result

**YOU MUST CALL EAP WITHIN 24 HOURS TO MAKE YOUR APPOINTMENT.**

EAP Phone Number:    1-800-963-0060

Coworker Signature	Date
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*Copies to:   Human Resources  
                    Coworker*